



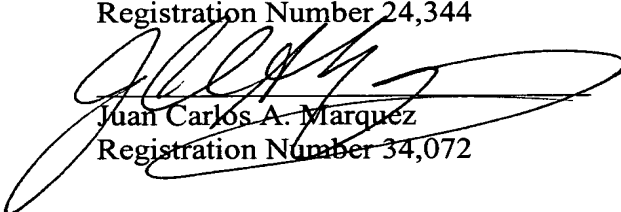
Examiner
Nguyen, Kevin M.

☒ Petition for Extension of Time (2 months)
☒ RCE
☐ Information Disclosure Statement w/refs
☐ Petition under _____

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [x] Checks in the amount of **\$790.00** for the RCE fee and **\$330.00** for the difference of the two month and one-month extension fee are enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

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